

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 10/589922		FILING DATE					
APPLICANT(S)													
CLAIMS													
	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT			AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1	1			51						
2		1		1			52						
3		2		1			53						
4		2		1			54						
5		2		1			55						
6		2		1			56						
7		2		1			57						
8	1		1	1			58						
9		1		1			59						
10		2		1			60						
11		2		1			61						
12		2		1			62						
13		2		1			63						
14		2		1			64						
15		2		1			65						
16		1		1			66						
17		1		1			67						
18		1		1			68						
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20		1		1			70						
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45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	2	↓	2	↓		↓	TOTAL IND.		↓		↓		↓
TOTAL DEP.	22	←	18	←		←	TOTAL DEP.		←		←		←
TOTAL CLAIMS	24		20				TOTAL CLAIMS						

PTO - 1360 (REV. 11/04)

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